

**2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F11000003395

**FILED**  
**Mar 13, 2015**  
**Secretary of State**  
**CC6538180847**

**Entity Name:** PAPER MAKING CONTROLS SERVICE INC

**Current Principal Place of Business:**

454 CHEROKEE DR  
MOULTRIE, GA 31768

**Current Mailing Address:**

516 E 1ST STREET  
PORT ST JOE, FL 32456

**FEI Number:** 58-2542613

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

HOBSON, MICHELLE  
516 E 1ST ST  
PORT ST JOE, FL 32456 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PC  
Name            HOBSON, ROBERT M  
Address        1953 SR 30A  
City-State-Zip: PORT ST JOE FL 32456

Title            DS  
Name            HOBSON, MICHELLE A  
Address        1953 SR 30A  
City-State-Zip: PORT ST JOE FL 32456

Title            VPC  
Name            RENAUD, CHARLES  
Address        1325 5TH STREET NW  
City-State-Zip: CAIRO GA 39828

Title            VPD  
Name            DYER, ELIZABETH N  
Address        100 HENDERSON LANE  
City-State-Zip: CHICKAMAUGA GA 30707

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** MICHELLE HOBSON

**CORPORATE  
SECRETARY**

**03/13/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date